SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County**

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

> ENTERED Date Stamp (Received)

Permit #: Date: Amount Paid: ISC Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Zoning Deat

Date_

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TYPE OF PERMIT F	REQUES	TED-	I LANI	D USE 🗆 SA	ANITAR	Y 🗆 PRIVY 🗆	CONDITION		SPECIAL	USE	□ B.O.	A. 🗆 C	OTHER
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23/55	4155	ION	oly 1	T. DR	C	BBLE, WI	5480	1/					
Contractor:	1		1		Conti	ractor Phone!	lumber:					Plumber	Phone:
KBNDY	100	102											
Authorized Agent: (Person Sig	ning Appli	cation on behal	f of Owner(s))	Agen	t Phone:	gent Mailing A	ddress (includ	le City/State	/Zip):	4211		Authorization
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PROJECT		() = / ~ ~	7		Tax II		10/3/	C/C/1/100	614				wing Ownership)
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						rescontinue	/	75		eet		in Zone?	Present?
	☐ Is I	Property	/Land withir	n 1000 feet of L				ucture is fro				Yes	☐ Yes
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☐ Non-Shoreland				<u> </u>									
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30,000	☐ Cor	versio	1	☐ 2-Story		SLAB	3 □ San		ary (Exists)	exists) Specify Type:			2 🗆
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(If you are signing on behalf of the owner(s) a tetter of authorization must accompany this application) Attach Address to send permit 14395 MICNBUGHT CABLE, W1. 54821 **Copy of Tax Statement**

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE aw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) Show: All Existing Structures on your Property (4) (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show any (*): (6) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7) Show any (*): (*) Wetlands; or (*) Slopes over 20% SEE ATTACHED MAP OF SULVEY Miss # 1 -

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement			Description	Measur	ement
Setback from the Centerline of Platted Road	190	Feet		Setback from the Lake (ordinary high-water mark)	0-	F = = 4
Setback from the Established Right-of-Way	190	Feet		Setback from the Lake (ordinary high-water mark)	90	Feet Feet
,				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	170	Feet				
Setback from the South Lot Line	795	Feet		Setback from Wetland		Feet
Setback from the West Lot Line	42	Feet		20% Slope Area on the property	☐ Yes	€No
Setback from the East Lot Line	11'	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	40	Feet		Setback to Well NG 113 COSELL		Feet
Setback to Drain Field	46	Feet		Setback to Well SEW WELL JO BE DRILED		7 000
Setback to Privy (Portable, Composting)		Feet		0.0,00		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

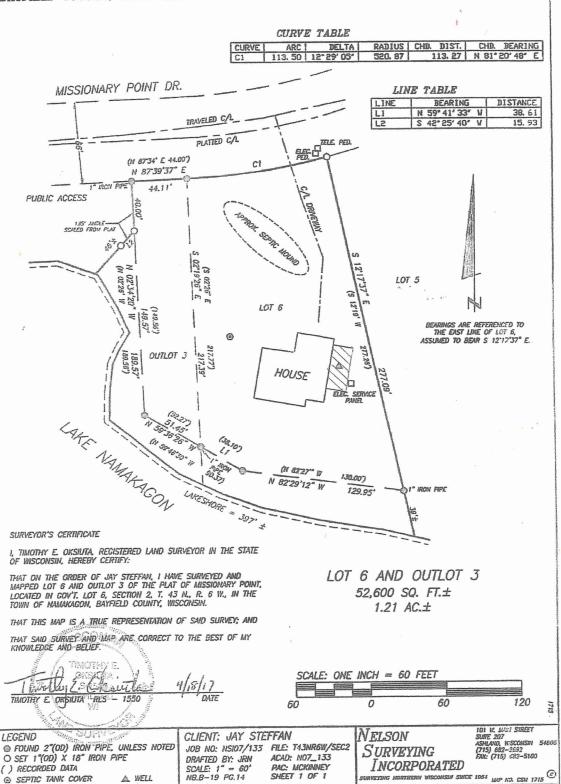
Issuance Information (County Use Only)	Sanitary Number: 404/27 # of bedrooms: 3 Sanitary Date: 9/9/02							
Permit Denied (Date):	Reason for Denial:							
Permit#: 19-0355	Permit Date: 10 -1	'-19						
Is Parcel a Sub-Standard Lot □ Yes (Deed of Record □ Yes (Fused/Contigu □ Yes Used □ Yes □	ous Lot(s)) 💆 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☑ No		Yes PNo Yes No			
Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:		Previously Granted by Yes No	/ Variance (B.O.A.)	e #:				
		Were Property Line	es Represented by Owner Was Property Surveyed	☐ YesYes				
Inspection Record:				Zoning District (8-1)			
		1		Lakes Classification (1			
Date of Inspection: 9/28/19	Inspected by:			Date of Re-Inspection				
Condition(s): Town, Committee or Board Conditions Attac	ched? Yes No - (If	No they need to be atta	ched.)					
Signature of Inspector:	obtained prior to t	C permit from the spection agency much the start of construct and maintain setbac	ust be	Date of Approval:	9/27/19			
Hold For Sanitary: Hold For TBA: Hold For TBA:	Hold For Affic	davit: 🗌	Hold For Fees: 🗌	_				

MAP OF SURVEY



LOT 6 AND OUTLOT 3 OF THE PLAT OF MISSIONARY POINT, LOCATED IN BAYFIELD COUNTY, WISCONSIN.

LOT 6 AND OUTLOT 3 OF THE PLAT OF MISSIONARY POINT, LOCATED IN BAYFIELD COUNTY, WISCONSIN.



City, Village, State or Federal May Also Be Required

SANITARY - 404127 (9/9/2002)
SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Issued To: David & Jeanie Baum / Karl Kastrosky, Agent 19-0355 No. Namakagon Town of Range 6 W. 43 N. Township 1/4 Section Location: $\frac{1}{4}$ of Subdivision Plat of Missionary Point CSM# Block 6 Lot Gov't Lot

For: Residential Addition / Alteration: [1- Story; Garage (16' x 22') = 352 sq. ft.; Office (14' x 16') = 224 sq. ft.; Total Overall = 576 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction If required. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

October 1, 2019

Date

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT



Permit #:	19-0350
Date:	10-1-19
Amount Paid:	\$175 9-241
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONS			ALL PERIVITS F	IAVE BEEN 1330ED	TO AFF	LICANT. ELAZ	11/06		FILL OU	TIN INK (NO F	'ENCIL)		
TYPE OF PERMIT R Owner's Name:	EQUESTE	ED→	☐ LANI	D USE SA	NITAR		CONDITION		☐ SPECIAL	USE 🗆 B.O.		OTHE	
			- 1				De.	y/State/Zi	•		Telepho	one:7/	15-
DAULD &	DEA	KIR	- BO	249	23	155 19155	iony C	ABL	R.WI.	54821	194		086
Address of Property:	Controlle.												
23/55 MISSIONDES PT. DR. CABLE, W4. 54821 Contractor: Contractor Phone: Plumber: Pl													
Contractor: Plumber: Plumber: Plumber Phone:											e:		
Authorized Agent: (F	ent: (Person Signing Application on behalf of Owner(s)) Agent Phone: Agent Mailing Address (include City/State/Zip): Written Authorization											rization	
HARL.	L KASTARCII 215-500 -0157 16100 CABLE WI 5881 Attached												
PROJECT	100	3/06	Sig		Tax II		19095	- 1010	MAUG	Recorded Docu			
LOCATION	Legal D	escrip	tion: (Use Ta	ax Statement)		25020)			2019 R			683
			Gov't Lot	Lot(s)	CSM			(s) No.	Block(s) No.	Subdivision:	Pr		01
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Shoreland →	☐ Is Pro	operty	/Land withir	1000 feet of La	ake, Poi	nd or Flowage	Distance Str	ucture is	from Shoreline	riooupia			
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Value at Time							Total # of		NAZI-				Type of
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material		a (fill a)					structure						property
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30,000		ersion		2-Story			₫ 3			Specify Type:			
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(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent: _

Address to send permit _

aw or Sketch your Property (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

Show Location of: (1)

Proposed Construction

(2) Show / Indicate: (3) Show Location of (*):

North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road)

(4)Show:

(5)

All Existing Structures on your Property

Show: (6) Show any (*):

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(7)Show any (*): (*) Wetlands; or (*) Slopes over 20%

SEE ATTOCHEO SITE / GRADING PLAY

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement Description		Measurement		
Setback from the Centerline of Platted Road	Feet		Setback from the Lake (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek		Feet
			Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	Feet				
Setback from the South Lot Line	Feet		Setback from Wetland		Feet
Setback from the West Lot Line	Feet		20% Slope Area on the property	☐ Yes	□ No
Setback from the East Lot Line	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank					
Setback to Drain Field	Feet		Setback to Well		Feet
Setback to Privy (Portable, Composting)	Feet Feet				

n ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the ther previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

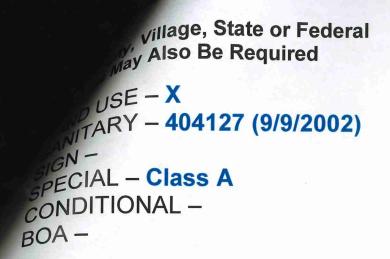
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:		
Permit Denied (Date):	Reason for Denial:					
Permit #: 19-0356	Permit Date: 16-1	1-19				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes Yes	ous Lot(s)) // No	Mitigation Required Mitigation Attached	□ Yes □ No □ Yes □ No	Affidavit Required		
Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:		Previously Granted by ☐ Yes ✓ No	/ Variance (B.O.A.)	e #:		
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed Yes Yes				
us per darl-he talked w/10	m different to	How on pa	per preject.	Zoning District (R/) Lakes Classification ()		
Date of Inspection:	Inspected by:	/ /		Date of Re-Inspection:		
Condition(s): Town, Committee or Board (;a	ched.)			
placed to wetlands sl without nec	ilt fence or staked hay be prevent wetland siltanall not be filled, graded essary permit from WD.	tion. Soil in I, or disturbed NR.		Date of Approval: 9/27/4		
Hold For Sanitary: Hold For TBA: Hold For TBA:	Hold For Affid		Hold For Fees:			



BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

19-0356 David & Jeanie Baum / Karl Kastrosky, Agent Issued To: No. Location: **Township** Town of **Namakagon** Section Range 6 W. Subdivision Plat of Missionary Point Gov't Lot 6 CSM# Lot Block

For: Residential Other: [Shoreland Grading = 4,600 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Silt fence or staked hay bales must be places to prevent wetland siltation. Soil in wetlands shall not be filled, graded, or disturbed without necessary permit from WDNR. Adhere to submitted grading plan.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

October 1, 2019

Date